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PTO/SB/30 (10-01)

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U.S. Patent and Trademark Office - DEPARTMENT OF COMMERCE

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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

Application Number	09/692,762
Filing Date	October 19, 2000
First Named Inventor	Donna Galvin
Art Unit	3676
Examiner Name	John B. Walsh
Attorney Docket Number	281241-00001-2

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR 1.114

- a. Previously submitted April 11, 2002
- i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____ (Any unentered amendment(s) referred to above will be entered).
 - ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
 - iii. Other _____
- b. Enclosed
- i. Amendment/Reply iii. Information Disclosure Statement (IDS)
 - ii. Affidavit(s)/Declaration(s) iv. Other _____

2. Miscellaneous

- a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. Other _____

3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 500859
- | | | | | | |
|--|------------|----------|----------|-----------|----------|
| i. <input checked="" type="checkbox"/> RCE fee required under 37 CFR 1.17(e) | 07/25/2002 | AWONDAF1 | 00000095 | 500859 | 09692762 |
| ii. <input type="checkbox"/> Extension of time fee (37 CFR 1.136 and 1.17) | 02 FC:241 | | | 640.00 CH | |
| iii. <input type="checkbox"/> Other _____ | | | | | |
- b. Check in the amount of \$ _____ enclosed 07/25/2002 AWONDAF1 00000095 09692762
- c. Payment by credit card (Form PTO-2038 enclosed) 01 FC:279 370.00 CH

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print /Type)	Alan G. Towner	Registration No. (Attorney/Agent)	32,949
Signature		Date	July 19, 2002

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, ~~Box RCE~~, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print /Type)	Alan G. Towner
Signature	

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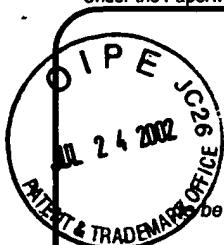
DAG/8

OFFICE OF PETITIONS

PTO/SB/21 (08-00)

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TRANSMITTAL
FORM

Total Number of Pages in This Submission

Application Number

09/692,762

Filing Date

10/19/2000

First Named Inventor

Donna Galvin

Group Art Unit

3676

Examiner Name

John B. Walsh

Attorney Docket Number

281241-00001-2

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	
<input type="checkbox"/> After Final	<input checked="" type="checkbox"/> Petition for Revival (unintentional) <input type="checkbox"/> Petition to Convert to a Provisional Application	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Alan G. Towner Pietragallo, Bosick & Gordon
Signature	
Date	07/19/2002

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

07/19/2002

Typed or printed name	Alan G. Towner
Signature	
	Date
	07/19/2002

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PTO/SB/17 (10-01)

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**FEET TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

METHOD OF PAYMENT (\$ 1010.00)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 500859

Deposit Account Name Pietragallo

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27

- 2.
-
- Payment Enclosed:

 Check Credit card Money Order Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	740	201	370 Utility filing fee	
106	330	206	165 Design filing fee	
107	510	207	255 Plant filing fee	
108	740	208	370 Reissue filing fee	
114	160	214	80 Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	=
Multiple Dependent	-3** =	X	=

Large Entity Small Entity

Fee Code (\$)	Fee (\$)	Fee Code (\$)	Fee Description
103	18	203	9 Claims in excess of 20
102	84	202	42 Independent claims in excess of 3
104	280	204	140 Multiple dependent claim, if not paid
109	84	209	42 ** Reissue independent claims over original patent
110	18	210	9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00)

**or number previously paid, if greater; For Reissues, see above

Complete if Known	
Application Number	09/692,762
Filing Date	10/19/2000
First Named Inventor	Donna Galvin
Examiner Name	John B. Walsh
Group Art Unit	3676
Attorney Docket No.	281241-00001-2

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920*	112 920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 55 Extension for reply within first month	
116	400	216 200 Extension for reply within second month	
117	920	217 460 Extension for reply within third month	
118	1,440	218 720 Extension for reply within fourth month	
128	1,960	228 980 Extension for reply within fifth month	
119	320	219 160 Notice of Appeal	
120	320	220 160 Filing a brief in support of an appeal	
121	280	221 140 Request for oral hearing	
138	1,510	138 1,510 Petition to institute a public use proceeding	
140	110	240 55 Petition to revive - unavoidable	
141	1,280	241 640 Petition to revive - unintentional	640.00
142	1,280	242 640 Utility issue fee (or reissue)	
143	460	243 230 Design issue fee	
144	620	244 310 Plant issue fee	
122	130	122 130 Petitions to the Commissioner	
123	50	123 50 Processing fee under 37 CFR 1.17(q)	
126	180	126 180 Submission of Information Disclosure Stmt	
581	40	581 40 Recording each patent assignment per property (times number of properties)	
146	740	246 370 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249 370 For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279 370 Request for Continued Examination (RCE)	370.00
169	900	169 900 Request for expedited examination of a design application	
Other fee (specify)			
*Reduced by Basic Filing Fee Paid			SUBTOTAL (3) (\$ 1010.00)

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Alan G. Towner	Registration No. (Attorney/Agent)	32,949	Telephone (412) 263-4340
Signature	<i>Alan G. Towner</i>		Date	07/19/2002

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